

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation FEMINIST MAJORITY	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1600 WILSON BLVD SUITE 801	
(c) City, State and ZIP Code ARLINGTON VA 22209	
3. FEC Identification Number C C90010646	
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Individual filers only	Name of Employer Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☐ 48-Hour Notice
☐ July 15 Quarterly Report
☒ October Quarterly Report
☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
0	7

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	9

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS 30663.00

7. TOTAL INDEPENDENT EXPENDITURES..... 10007.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

DIANE ELIZABETH CUTRI

10/18/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF FILER (In Full)
FEMINIST MAJORITY

A. Full Name (Last, First, Middle Initial)

TERRY LAST

Mailing Address

2 CLARIDGE DRIVE

City

VERONA

State

NJ

Zip Code

07044

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: F56.000001

Amount of Each Receipt this Period

300.00

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

ARTIST

B. Full Name (Last, First, Middle Initial)

TOLLIE MILLER

Mailing Address

88 KENMORE STREET

City

BLOOMFIELD

State

CT

Zip Code

06002

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: F56.000002

Amount of Each Receipt this Period

300.00

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

C. Full Name (Last, First, Middle Initial)

EMILY ROSENBERG

Mailing Address

6114 LASALLE AVENUE

City

OAKLAND

State

CA

Zip Code

94611

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: F56.000003

Amount of Each Receipt this Period

1000.00

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A-RETIRED

Occupation

RETIRED

D. Full Name (Last, First, Middle Initial)

COLLETTE SELL

Mailing Address

200 EDGEWOOD

City

MILL VALLE

State

CA

Zip Code

94941

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: F56.000004

Amount of Each Receipt this Period

300.00

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

EVENT PRODUCER

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page carry total to Line 6)

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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NAME OF FILER (In Full)
FEMINIST MAJORITY**A.** Full Name (Last, First, Middle Initial)

DIANA BUCKHANTZ

Mailing Address

176 S. BEACHWOOD DR.

City

LOS ANGELES

State

CA

Zip Code

90004

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 1 0

Transaction ID: F56.000005

Amount of Each Receipt this Period

2500.00

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT, PRESS RELATIONS

B. Full Name (Last, First, Middle Initial)

MAVIS NICHOLSON LENO

Mailing Address

P.O. BOX 7885

City

BURBANK

State

CA

Zip Code

91510

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 1 0

Transaction ID: F56.000006

Amount of Each Receipt this Period

2000.00

Name of Employer

SELF EMPLOYED

Occupation

WRITER, SPEAKER

C. Full Name (Last, First, Middle Initial)

RITA MAGIDSON-HAFT

Mailing Address

2355 BENEDICT CANYON

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Transaction ID: F56.000007

Amount of Each Receipt this Period

2500.00

Name of Employer

SELF EMPLOYED

Occupation

CLOTHING MANUFACTURER

D. Full Name (Last, First, Middle Initial)

VICTORIA RISKIN

Mailing Address

680 RANDALL ROAD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Transaction ID: F56.000008

Amount of Each Receipt this Period

1000.00

Name of Employer

SELF EMPLOYED

Occupation

WRITER-PRODUCER

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page carry total to Line 6)

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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NAME OF FILER (In Full)
FEMINIST MAJORITY**A.** Full Name (Last, First, Middle Initial)SUSAN & LEONARD NIMOY

Mailing Address

501 S. BEVERLY DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90212

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Transaction ID: F56.000009

Amount of Each Receipt this Period

500.00

Name of Employer

Occupation

B. Full Name (Last, First, Middle Initial)INA COLEMAN

Mailing Address

401 S. MUIRFIELD ROAD

City

LOS ANGELES

State

CA

Zip Code

90020

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Transaction ID: F56.000010

Amount of Each Receipt this Period

15000.00

Name of Employer

Occupation

FEMINIST MAJORITY FOUNDATION

MANAGING DIRECTOR

C. Full Name (Last, First, Middle Initial)WANDA SOBIESKI

Mailing Address

5105 WYNDCROFT

City

KNOXVILLE

State

TN

Zip Code

37914

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 1 0

Transaction ID: F56.000011

Amount of Each Receipt this Period

1000.00

Name of Employer

Occupation

SOBIESKI MESSER & ASSOCIATES

ATTORNEY

D. Full Name (Last, First, Middle Initial)DONORS VARIOUS

Mailing Address

115 INDIVIDUAL DONORS
CONTRIBUTIONS \$200 AND UNDER

City

State

Zip Code

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 0

Transaction ID: F56.000012

Amount of Each Receipt this Period

4263.00

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional)

20763.00

TOTAL This Period (last page carry total to Line 6)

30663.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

FEMINIST MAJORITY

Full Name (Last, First, Middle Initial) of Payee
FEMINIST MAJORITY

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 0Mailing Address
1600 WILSON BLVD.
SUITE 801

Amount

1512.00

City
ARLINGTONState
VAZip Code
22209Purpose of Expenditure
SALARY AND BENEFITSCategory/
Type

Office Sought:

☒

House

State: PA

House

☐

Senate

District: 16

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
JOSEPH PITTSCalendar Year-To-Date Per Election
for Office Sought

2049.50

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
FEMINIST MAJORITY

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 0Mailing Address
1600 WILSON BLVD.
SUITE 801

Amount

8495.00

City
ARLINGTONState
VAZip Code
22209Purpose of Expenditure
SALARY AND BENEFITSCategory/
Type

Office Sought:

☐

House

State: CA

Senate

☒

Senate

District: _____

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
BARBARA BOXERCalendar Year-To-Date Per Election
for Office Sought

8495.00

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

10007.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

10007.00